



Health Services
LOS ANGELES COUNTY

July 1, 2016

Los Angeles County
Board of Supervisors

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First District

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TO: Supervisor Hilda L. Solis, Chair
Supervisor Mark Ridley-Thomas
Supervisor Sheila Kuehl
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: Mitchell H. Katz, M.D. *Mitchell Katz*
Director

SUBJECT: **DEPARTMENT OF HEALTH SERVICES' (DHS)
RECRUITMENT AND TRAINING PLANS FOR THE
ENTERPRISE HEALTH INFORMATION
MANAGEMENT (EHIM) DIVISION**

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On April 26, 2016, the Board approved the Temporary Health Information Management Personnel Services (THIMPS) Agreement and instructed the Director of Health Services to report back quarterly on progress being made to reduce the use of THIMPS registries. In addition, DHS was instructed to fill the vacant Enterprise Health Information Management Division items; reduce coding backlogs at DHS facilities throughout the County of Los Angeles; describe how training will be achieved and whether any permanent positions will be filled using the Workforce Investment Board or Veterans training programs; and to include all of the DHS facilities. This is to update the Board on the progress that has been made to date.

Background

The Department is working to increase the number of EHIM coding staff through external recruitment and internal education and training of existing non-coder County staff who do not have coding qualifications, but wish to develop a career in coding. This will reduce DHS' reliance on THIMPS agreements.

Under the THIMPS agreements, DHS is using contracted coding staff to supplement the current shortfall in qualified County staff to maintain current with patient care services coding under the new and more labor intensive ICD-10 schema that went into effect nationally on October 1, 2015.

To ensure access to high-quality, patient-centered, cost-effective health care to Los Angeles County residents through direct services at DHS facilities and through collaboration with community and university partners.

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Recruitment and Training

The DHS EHIM Division is working with the DHS Human Resources Division (DHS HR) to post job opening bulletins to recruit qualified coding staff. EHIM is also partnering with DHS HR to review applications for coding positions. In order to attract coders to DHS, EHIM worked with SEIU 721 and County CEO on a salary increase proposal, which was approved during the last bargaining session. The approved salary increase will make vacant budgeted coder positions at DHS more competitive for applicants in the challenging coder marketplace under ICD-10. The coding positions are open to all qualified applicants, including veterans. DHS HR applies the appropriate credit to veteran applications during the application process.

The DHS EHIM Division provided electronic ICD-10 coding training in 2014 and 2015. It also partnered with SEIU 721 to provide ICD-10 classroom training in 2015. More recently, the DHS EHIM Division was able to secure funding from the \$1 Million Fund and will implement additional training beginning the 2nd quarter of Fiscal Year 2016-2017. Moreover, the DHS EHIM Division and SEIU 721 have reached out to Workforce Investment Board to explore how workforce development could provide the specific training required by the DHS coding staff. Additional coding training has been developed by EHIM and will be implemented based on the attached schedule.

In addition, EHIM has developed an output dashboard to track each coder's output to determine the level of success DHS will have without contract coders. EHIM will continue to work with HR Employee Relations to establish a DHS coding output standard in which all coders can achieve.

Attached is the work that has been accomplished to meet the following goals:

1. Augment training to existing County workforce to join the coding teams and provide continuing education training to coders already on coding teams;
2. Hire additional County coding staff; and
3. Reduce reliance on contracted coding workforce (i.e. THIMPS agreements).

Next Steps

DHS will continue to work with SEIU 721 and update the Board on the progress being made. If you have any questions or require additional information, please contact me at (213) 240-8101 or Dr. Anish Mahajan, Director of System Planning and Data Analytics, at (213) 240-8416.

Attachment

c: Chief Executive Office
County Counsel
Executive Office, Board of Supervisors

**Los Angeles County Department of Health Services
Enterprise Health Information Management**

Coder Training Plan

Training Name	Date of Implementation	Training Description
Inpatient Coder Training	6/18/16 (DHS-wide)	EHIM will use electronic training software to provide consistent training scenarios for DHS Inpatient coders. EHIM will use hypothetical patient care scenarios and DHS-specific patient care scenarios using DHS case documentation.
Evaluation and Management (E&M) Coding Training	Begin 7/5/16 at Harbor-UCLA and will be rolled out to the other Hospitals and Ambulatory Care Network sites	Training on how to apply Evaluation and Management CPT codes based on the Centers for Medicare & Medicaid Services (CMS) 1997 guidelines. E&M codes identify the type of physician professional services provided to a patient during an encounter.
ICD-10 CM: External Cause Codes Training	7/11/16 (DHS-wide)	Training on how to apply multiple applicable External Cause Codes on encounters involving accidents and/or injuries. External Cause Codes provide information on the how/why/where regarding the patient's injuries.
Coder Training to transition DHS staff who are on EHIM coding items, but are not currently coding.	7/25/16 (Pilot Group)	6-8 weeks of training designed to provide basic coding training (ICD-10 CM, CPT, and E&M codes) to non-coding staff on coding items. The goal is to prepare staff to be added to our coding outpatient team at facilities that are most in need of additional coding staff.
Use of DHS-wide Coding Aids	8/1/16 (DHS-wide)	Coding Aids will be provided to DHS Inpatient and Outpatient coders to address common coding, process and system issues encountered while coding medical records (missing documentation, improper discharge disposition, incorrect admission, and discharge dates, etc.). The Coding Aids will provide consistent training, ensure consistency with processes, and reduce "non-coding" time spent on research, which will allow coders to focus on coding.

Coder Hiring Plan

Prior to the transition to ORCHID, the Affinity electronic health record at DHS consisted of six separate systems, requiring coding staff to be located physically at each location to code the medical record. Now that DHS has transitioned to ORCHID, which is a single system for all DHS facilities, EHIM coding staff can code medical record encounters that occur at any facility, regardless of their physical work location. DHS facilities that have relative shortfalls in coding capacity are now being assisted with the workload by coding staff from the other facilities.

To date, EHIM has submitted 18 Personnel Action Requests (PARs) against the 64 vacant budgeted coder items. There will be 46 remaining items to fill, if all pending PARs are approved.

Facility	PARS Submitted by EHIM as of 6/30/16
El Monte Comprehensive Health Center	0
H.H. Humphrey Comprehensive Health Center	0
Harbor-UCLA Medical Center	4
High Desert Regional Center	1
Hudson Comprehensive Health Center	0
LAC+USC Medical Center	6
Long Beach Comprehensive Health Center	0
Martin Luther King Jr. Outpatient Center	1
Mid-Valley Comprehensive Health Center	1
Olive View-UCLA Medical Center	5
Rancho Los Amigos National Rehabilitation Center	0
Roybal Comprehensive Health Center	0
TOTAL	18

Contract Coding Staff Reduction Plan

Month/Year	Number of Contract Coding FTEs (Only HIM Departments/DHS-wide)	Number of Contract Coding Staff FTEs Reduced (Only HIM Department/DHS-wide)
3rd Quarter 2015-16	71.35	*
4th Quarter 2015-16	*	*

* Data will be available next reporting period.